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NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM.

2014-001598

Klamath County, Oregon



00148935201400015980010013

02/25/2014 10:01:04 AM

Fee: \$42.00

SPACE RESERVED
FOR
RECORDER'S USE

Thomas J. Crist
4620 Alpine Drive
Klamath Falls, OR 97603

Owner's Name and Address

Katherine M. Butler
4620 Alpine Drive
Klamath Falls, OR 97603

Beneficiary's Name and Address

After recording, return to (Name and Address):

Thomas J. Crist
4620 Alpine Drive
Klamath Falls, OR 97603

Until requested otherwise, send all tax statements to (Name and Address):

Thomas J. Crist
4620 Alpine Drive
Klamath Falls, OR 97603

NOTICE TO OWNER: You should carefully read all information on this form. You may want to consult a lawyer before using this form. This form must be recorded before your death or it will not be effective. (Type or legibly print all information.)

TRANSFER ON DEATH DEED

KNOW ALL BY THESE PRESENTS that I, Thomas J. Crist

_____, owner of the real property described below,
whose address is 4620 Alpine Drive Klamath Falls, OR 97603

upon my death, do hereby transfer to the beneficiary designated below, all of my right, interest and title in that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Klamath County, State of Oregon, described as follows (legal description of the property):

Banyon Park 1st Addition, Block 4 Lot 6

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

I designate Katherine M. Butler

whose mailing address, if available, is 4620 Alpine Drive Klamath Falls, OR 97603

as my primary beneficiary* if that person survives me.

(Optional) I designate _____

whose mailing address, if available, is _____

as my alternate beneficiary** if that person survives me.

Before my death, I have the right to revoke this deed.

(Optional) SPECIAL TERMS:

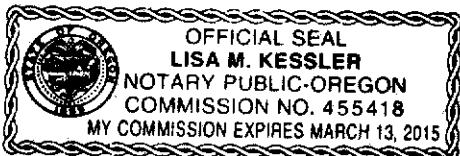
In construing this instrument, where the context so requires, the singular includes the plural.

IN WITNESS WHEREOF, the undersigned has executed this instrument on February 25, 2014

Thomas J. Crist

STATE OF OREGON, County of Klamath ss.

This instrument was acknowledged before me on February 25, 2014
by Thomas J. Crist



Lisa Kessler
Notary Public for Oregon

My commission expires March 13, 2015

*ORS 93.961(2) states that a designated beneficiary must be identified by name; "a beneficiary designation that identifies beneficiaries only as members of a class is void."

**93.953(2)(b) states that an individual may designate one or more "Alternate beneficiaries who take the property only if none of the primary beneficiaries is qualified or survives the transferor."

NOTE: ORS 93 provides that Transfer on Death deeds: (a) Transfer only property that the transferor owns at time of death, may not transfer property to designated beneficiaries with right of survivorship, but may designate shares of ownership (93.969); (b) Are always revocable (93.955); (c) Must be recorded before death to be effective (93.961(1)(d)), but need not be delivered to designated beneficiaries (93.963(1)); (d) Transfer property without any warranties or covenants of title (93.969(4)), and subject to all debts of the decedent, as well as to all liens, mortgages and conveyances to which the property may be subject (93.969(2)).

Returned @ County